

**Work Order ID 103050****\*103050\***

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June-12-13 9:25:58 AM

Item ID: D3245-9

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Item Name: Gasket 8.35

Stop

**\*NS2\***

Start Date: 6/11/13 Start Qty: 8.00

**\*8\***

Cust Item ID:

Required Date: 6/11/13 Req'd Qty: 8.00

**\*8\***

Customer:

Reference:

Approvals:

Process Plan: ML5Date: 13-06-13

Tooling:

Date:

Run Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D3245	D

100

**\*100\***

FLOW WATER JET

Waterjet

Memo

0.00

0.00

100

Jm3-06-27

FLOW CNC Waterjet

1-Cut as per Dwg D3245

Dwg Rev: 0Prog Rev: 0

110

QC2- Inspect parts off machine FAI/FAIB

0.00

**\*110\***

QC

Memo

0.00

Quality Control

10

Jm3-06-27

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_

Date: \_\_\_\_\_

Work Order update only 

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

## FAULT CATEGORY

Landing Gear	General								
	Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Folio/Program <input type="checkbox"/>		Outside Dimensions <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>			
	Centre Not Concentric <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Grain <input type="checkbox"/>		Over/Under tolerance <input type="checkbox"/>	Set-up <input type="checkbox"/>			
	Cracks <input type="checkbox"/>	Broken/Damage/Defect <input type="checkbox"/>	Hardware <input type="checkbox"/>		Part Incorrect <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>			
	Crimp/Kink/Ripple/Wave <input type="checkbox"/>	Burrs <input type="checkbox"/>	Inspection Incomplete/Unqualified <input type="checkbox"/>		Part Lost/Missing <input type="checkbox"/>	Weld <input type="checkbox"/>			
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>		Part Moved <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>			
	Crushing <input type="checkbox"/>	Countersink <input type="checkbox"/>	Misaligned/off center <input type="checkbox"/>		Positioned Wrong <input type="checkbox"/>				
	Heat Treat <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Mislabeled <input type="checkbox"/>		Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>			
	Inspection Strip in Tube <input type="checkbox"/>	Drawing <input type="checkbox"/>	Misread <input type="checkbox"/>						
	Marks/Chatter <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Off-set <input type="checkbox"/>						
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>						
	Wave/Twist in Tube <input type="checkbox"/>	Fit/Function <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>						



DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Date:

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Date:

## Work Order update only



Work Order Update Form				Work Order Update Summary																			
Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS																	
Suspected Unapproved				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>															
Root Cause		Date	Step	Qty	Description of work order update or non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector											
Design																							
Doc/Data																							
Equip/Tooling																							
Handling/Pre																							
Material																							
Operator																							
Offset/Setup																							
Process																							
Supplier																							
Training																							
Transport																							
Unapproved																							
FAULT CATEGORY																							
Landing Gear				General																			
Bending Centre Not Concentric Cracks Crimp/Kink/Ripple/Wave Cuffs Crushing Heat Treat Inspection Strip in Tube Marks/Chatter Turning Sequence Wave/Twist in Tube				Bend BOM/Route Broken/Damage/Defect Burrs Contamination Countersink Cut Too Short Drawing Drill Holes Finish Fit/Function								Folio/Program Grain Hardware Inspection Incomplete/Unqualified Instructions Incomplete/Unclear Misaligned/off center Mislabeled Misread Off-set Out of Calibration Out of Sequence				Outside Dimensions Over/Under tolerance Part Incorrect Part Lost/Missing Part Moved Positioned Wrong Power Loss/Surge				Pressure/Forced Set-up Temperature/Cure Weld Wrong Stock Pulled			

# Picklist Print

June-12-13 9:25:58 AM

Page 1

Work Order ID:	103050	Start Date:	6/11/13	Required Date:	6/11/13
Parent Item:	D3245-9	Start Qty:	8.00	Required Qty:	8.00
Parent Item Name:	Gasket 8.35				

Comments: IPP B04.12.06 Made in-house KJ/JLM  
IPP Rev:C ecn 1052/water jet 07-11-05 DD verified by:EC IPP Rev:D 12.11.07 PER DWG  
REV.D DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
G89 coated cloth		Purchased	No			100	sf	66.6000	0.0406	0.3418944 1.0			JM3-0627

Location	Loc Qty	Loc Code
MAT052	66.6	
123993	4.5	
124498	62.1	124498

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_

Date: \_\_\_\_\_

Work Order update only 

Work Order: _____	DISPOSITION			AGAINST DEPARTMENT/PROCESS				
Part No. _____	Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
NCR No. _____	Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
	Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

## FAULT CATEGORY

Landing Gear		General									
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Bend	<input type="checkbox"/> Folio/Program	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Pressure/Forced							
	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Grain	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Set-up							
	<input type="checkbox"/> Broken/Damage/Defect	<input type="checkbox"/> Hardware	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Temperature/Cure							
	<input type="checkbox"/> Burrs	<input type="checkbox"/> Inspection Incomplete/Unqualified	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Weld							
	<input type="checkbox"/> Contamination	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Wrong Stock Pulled							
	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misaligned/off center	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Other							
	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Power Loss/Surge								
	<input type="checkbox"/> Drawing	<input type="checkbox"/> Misread									
	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Off-set									
	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Calibration									
	<input type="checkbox"/> Fit/Function	<input type="checkbox"/> Out of Sequence									

DART AEROSPACE LTD	Work Order:	103050
Description: Gasket	Part Number:	D3245-9
Inspection Dwg: D3245	Rev: D	Page 1 of 1

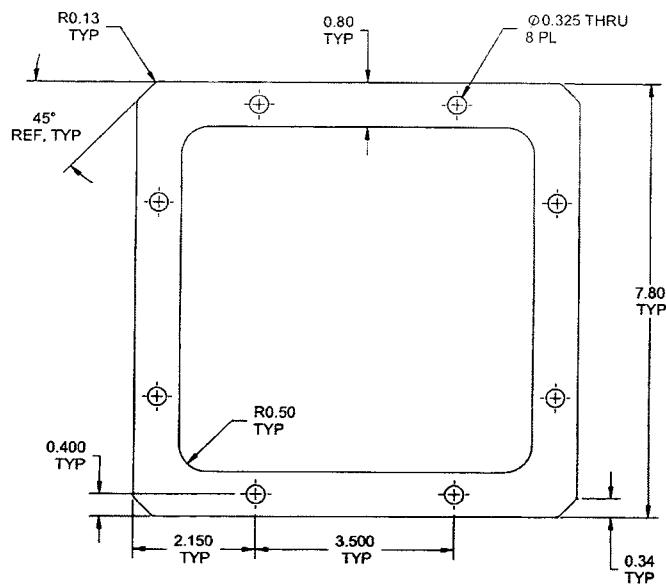
## **FIRST ARTICLE INSPECTION CHECKLIST**

Measured by:	JM
Date:	13-06-27

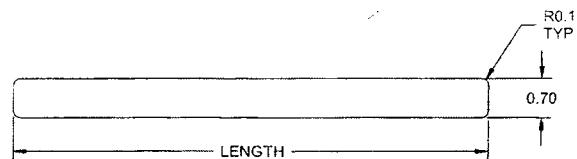
**Audited by:** 

<b>Preliminary Approval:</b>	
<b>Date:</b>	

Rev	Date	Change	Revised by	Approved
A	07.11.23	New Issue	KJ/EC/DD	
B	12.06.19	Dimensions updated per Dwg Rev C	KJ	
C	13.05.08	Dimensions updated per Dwg Rev D	KJ	



D3245-7 GASKET



D3245-X GASKET

P/N	LENGTH
D3245-9	8.35
D3245-11	9.01
D3245-13	9.50

**NOTES:**

- 1) MATERIAL: THERMO-CHEM P/N G-89, 0.060 THICK  
POSSIBLE SUPPLIER: A.R. THOMSON GROUP 
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: D3245-7 = 0.04 lbs; D3245-9/-11/-13 = LESS THAN 0.01 lbs

DESIGN	7E	DART AEROSPACE LTD
DRAWN	97	HAWKESBURY, ONTARIO, CANADA
CHECKED	97	DRAWING NO. REV. D
MFG. APPR.		D3245 SHEET 7 OF 7
APPROVED		TITLE SCALE
DE APPR.		ACCESS PANEL ASSY NTS
DATE	12.10.16	COPYRIGHT © 2004 BY DART AEROSPACE LTD THIS DOCUMENT IS THE PROPERTY OF DART AEROSPACE LTD. IT IS EXPRESSED THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD

103050 MLJ  
13-06-13

RELEASED  
2012-11-06  
MF

